



Arkansas Department of Human Services
Division of Youth Services

Policy No. 100.10 **Pages:** 3 **Manual:** Residential Operations

SUBJECT: Suicide Prevention and Intervention **EFFECTIVE DATE:** April 21, 2005

CHAPTER: 100 – Operations, Security & Control **ATTACHMENTS:** _____

REFERENCE: _____ **AUTHORIZED BY:** J. Kenneth Hales

I. POLICY:

The Division of Youth Services (DYS) and all contracted service providers shall provide for the identification of suicidal or self-injurious juveniles in DYS custody and intervene in any suicidal or self-injurious behavior in an early, prompt, and appropriate manner.

II. APPLICATION:

All DYS employees and contract personnel.

III. DEFINITIONS:

IV. PROCEDURES:

- A. When any DYS or contracted facility staff member observes or discovers juvenile behavior that may indicate potential suicide, the facility is responsible for assuring that appropriate preventative measures are taken to assure the safety of the juvenile.
- B. Each juvenile residential facility will have a written policy and procedure that specifically describes the facility suicide risk management and intervention practices. The procedure must be consistent with DYS Policy 100.10 and must be reviewed and approved by a qualified mental health professional. Furthermore, within sixty (60) days of the effective date of this policy, the facility policy and procedure must be submitted to the DYS Policy Manager/designee for review and comment. The DYS Policy Manager shall provide the DYS facilities contract administrator a copy of all facility suicide prevention policies and procedure to include all updates.
- C. The facility procedure will be reviewed by the facility and DYS Quality Assurance Unit at least annually and address the following requirements:
 1. Staff Training - All staff with responsibility for juvenile supervision must be trained in suicide risk awareness, verbal and behavioral cues, and prevention and intervention policy and procedure including DYS Policy 100.10.
 2. Identification Risk - Juveniles who have been assessed as suicide risks while in

DYS custody who are transferred to other facilities shall have in their records clear written identification of the risk. Each DYS and contracted facility must have adequate procedures in place to assure that all staff responsible for juvenile supervision are promptly made aware of any potential suicide risk.

3. Referral - Each DYS and contracted facility must have procedures in place to assure that appropriate referrals are made, where appropriate, to a qualified mental health professional to assess juveniles for suicide risk. The mental health professional will determine if the juvenile should be transferred to a psychiatric placement for stabilization or further assessment. If transfer is necessary, it will be initiated immediately.
4. Assessment - When suicidal risk behaviors or tendencies are indicated by the juvenile's history, screening or staff observation, an assessment of suicide risk will be conducted by a qualified mental health professional to determine the appropriate level of suicide precautions. The mental health professional will specify in writing, as appropriate, a specific level of precautions, any restrictions on the juvenile's activities, appropriate intervals for documenting observation of the juvenile's behavior and intervals for reassessment of the juvenile's condition.
5. Precautions - Suicide precautions are the procedures for supervising, observing, monitoring and documenting the behaviors of a juvenile who has been identified as a potential suicide risk. Each facility will have procedures in place that address safety measures to prevent suicidal behavior. Precautions will specify the following requirements:
 - a. Differentiation between two or more levels of risk and the precautions and juvenile activities appropriate for each level.
 - b. Procedures and intervals for room searches and person searches for at risk juveniles.
 - c. Prohibit stripping juveniles of all clothing, solely for suicide prevention, without the approval of a mental health professional.
 - d. If applicable, prohibit the use of mechanical restraints and isolation rooms, solely for suicide prevention, without the approval of a mental health professional.
 - e. Specify times when increased staff vigilance is necessary including staff breaks, juvenile bathroom time, bedtime, during shift changes and following conversations with family, legal representatives and court officials.
6. Facility Notifications and Incident Reporting - Procedures must specify which staff members are to be notified for each type of significant event relating to suicide risk.
 - a. DYS Incident Report will be completed and submitted according to DYS Policy 100.10 in every situation in which suicide is threatened or attempted by a juvenile. Upon receipt of the DYS Incident Report, the DYS Internal Affairs Unit (IAU) will report these incidents to the Department of Human Services (DHS) Incident Reporting Information System (IRIS).
 - b. Should the discovery of evidence indicating a potential risk for suicide

be made after the juvenile has been transferred to another facility or released, the provider will notify DYS IAU with an incident report. DYS IAU will immediately forward notification of the risk to the facility housing the juvenile or the designated CBP aftercare worker.

7. Treatment - Clinical level interventions and interaction with direct care staff appropriate for improving the demeanor and perspective of suicidal juveniles will be included in the procedures. These measures are intended to minimize the risk of self-harm and provide significant support and services to assist the juvenile to stabilize and have precautions removed.
8. Reevaluation - Juveniles identified as suicide risks will be reevaluated at designated intervals by a qualified mental health professional. Juveniles will be removed from precautions only with the written approval of a licensed mental health professional. Any changes in precautions will be clearly communicated in writing to all staff responsible for supervising juveniles.
9. Emergency Response - The procedure will specify how first aid and medical attention will be provided to a self-injurious juvenile when required.
10. Documentation - Observation for the prescribed level of suicide risk will be documented in the unit logbook at intervals specified by the mental health professional. The observation notes will indicate the juvenile's behavior and demeanor for the most recent documentation interval. All assessments, designations and reevaluations of suicide risk must be documented in the juvenile's case record.
11. Staff Qualifications - Assessments and reevaluations of suicide risk will be performed by a qualified mental health professional. For the purpose of these procedures, a qualified mental health professional is a licensed mental health professional or an unlicensed mental health professional working under the direct supervision of a licensed mental health professional, including psychiatrists and psychologists either employed by the facility or under contract with the facility.